PTO/SB/05 (06-03) Approved for use through 07/31/2003. OMB 0651-0032

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UTILITY	UTILITY				PC10805B				
PATENT APPLICATION	r	First II	nventor		William J. Curatolo				
TRANSMITTAL	r	Title			Method of Increasing the Bioavailability and Tissue Penetration of Azithromycin				
(Only for new nonapplications under 37C.F.R. §1.53(b))	H	Express Mail Label No			I Issue Pene	tration of Azithromycin			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO:			Mail Stop Commissioner for Patents Box 1450 Alexandria, VA 22313-1450				
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)  2. Applicant claims small entity status See 37 CFR 1.27  3. Specification [Total Pages 31 (preferred arrangement set forth below)  - Descriptive title of the Invention  - Cross References to Related Applications  - Statement Regarding Fed sponsored R&D  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the Invention  - Brief Summary of the Invention  - Brief Description of the Drawings (if filed)			comp Nucleotide (if applicable a	puter Progrand/or Andle, all necessification CD-R Paper Staten	gram (Apper nino Acid Se essary) uter Readab Sequence L OM or CD-F ment verifying	equence Submission le Copy (CRF) isting on:			
- Detailed Description - Claim(s) - Abstract of the Disclosure		10. 11. 12.		Power of Attorney nent (if applicable) Copies of IDS					
5. Drawing(s) (35 U.S.C. 113) Total sheets  Total pages 3			State	,	S)/PTO-144				
a. Newly executed (original or copy)  b. Copy from a prior application (37 CFR §1.63(d))  (for continuation/divisional with Box 18 completed)  i. DELETION OF INVENTOR(S)		13. 14. 15.	(Sho						
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6 Application Data Sheet, See 37 CFR 1,76		16.	(b)(2 or its	Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
	17 Other:								
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.  Continuation  Divisional  Continuation-in-part (CIP) of prior application No. 09/788,886  Prior application information: Examiner Group/Art Unit:  For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts  19. CORRESPONDENCE ADDRESS									
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Customer Number 25323 or Correspondence address below									
Name									
Address									
City State					Zip Code				
Country Telephone	Τ.				Fax				
NAME (Print/type) James T. Jones Signature Jamu?	<u>į</u> R	Registration No. (Attorney/Agent)  Date			Agent)	30,561 Oct. 17,2003			

This collection of information is required by \$7 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by \$3 U.S.C. 122 and \$7 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
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	Complete if Known											
FEE TRANSMITTAL				Application Number To Be Assigned								
for FY 2004			Filing Date Herewith									
Effective 10/01/2003. Patent fees are subject to annual revision.						First Named Inventor William J. Curatolo					0	
Ellective 10/01/2003. Patent lees are subject to annual revision.				Examiner Name To Be Assigned								
Applicant claims small status. See 37 CFR 1.27						Art Unit To Be Assigned						
T tal Amount of Payment Attomey Docket No.						PC PC10805B						
			ENT (check all tha		FEE CALCULATION (continued)							
☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None Order				3. AD	DITION A Entity Sn	NL FEI						
☑ Deposit Account:				Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description			Fee Paid	
Deposit Account Number	16-1445	5	-		1051	130	2051	65	Surcharge	e – late fee or oath		
Deposit Account	Pfizer Ir	nc		1052	50	2052	25	Surcharge				
Name The Director	is authoriz	ed to:	(check all that apply	1053	130	1053	130	Non-English specification				
☐ Charge fee(s) indicated below ☐ Credit any overpayments				1812	2,520	1812	2,520	For filing a request for Ex Parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)				1804	920*	1804	920°	Requesting publication of SIR prior to Examiner action				
Charge fee to the above-id			xcept for the filing fee unt.		1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action			
FEE CALCULATION					1251	110	2251	55	Extension for reply within first month			
1. BASIC F					1252	420	2252	210		for reply within secon		
Large Entit	y Small	Fee	<u>/</u>		1253 1254	950 1,480	2253 2254	475 740		n for reply within this n for reply within fou		
Code (\$)	Code	(\$)	Fee Description	Fee Paid	1254	1,460	2254	740	Extension	i for reply within fou	irin monu	
1001 770	2001	385	Utility filing fee	770	1255	2,010	2255	1,005	Extension	for reply within fifth	n month	
1002 340	2002	170	Design filing fee		1401	330	2401	165	Notice of	Appeal		
1003 530	2203	265	Plant filing fee		1402	330	2402	165	Filing a b	rief in support of an	appeal	
1004 770	2004	385	Reissue filing fee		1403	290	2403	145	Request	for oral hearing		
1005 160	2005	80	filing fee		1451	1,510	1451	1,510	l	institute a public use p	-	
					1452	110	2452	55	İ	revive unavoidable		
Subtotal (1)s \$ 770				1453	1,330	2453	665	Petition to revive – unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				1501	1,330	2501	665	Utility issue fee (or reissue)				
Extra Claims Fee from Fee Paid below				1502	480	2502	240	Design is	sue fee			
Total Claims	75	- 20**		= 990.00	1503	640	2503	320	Plant issu	e fee		
Independent	6	-3=	3 x 80	= 240.00	1460	130	1460	130	Petitions	to the Commissione	er	
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Multiple Depen	Jent				1807 1806	50 180	1807 1806	50 180	Processing fee under 37 CFR 1.17 Submission of Information Disclosure S		١ ١/	
Large Entity Small Entity				1000	100	1000	100	Submissi	on or mornatoricisco	Isure Smit		
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Description		8021	40	8021	40		g each patent assig times number of pr		
1202 18	2202	9	Claims in excess of 2	)	1809	770	2809	385		ubmission after fina		
1201 86	2201	43	Independent claims in	excess of 3	1810	770	2810	385	For each	additional invention (37 CFR 1.129(b)		
1203 290	2203	145	Multiple dependent cla	aim, if not paid	1801	770	2801	385		or Continued Barminati		
1204 86	2204	43	**Reissue independer	nt claims over original patent	1802	900	1802	900		or expedited exami n application	ination	
1205 18	2205	9	**Reissue independent original patent (\$)	1,230.00	Other Fee (specify)					_		
**or number previously paid, if greater; For Reissues, see above						ed by Basic	Filing F	ee Paid	5	Subtotal (3)	(\$)	<u> </u>
SUBMITTED BY (Complete if applicable)												
Name (Printe	d/Type)	Jam	es T. Jones			tration No.				Telephone	860-441-4	1903
Signature		+	75000			ney Agent)	<u>'                                    </u>					
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public. Eredit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

card information and authorization on PTO-2038.

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